									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2003								19/724859					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		<pre>/ OR</pre>	OTHER SMALL		
TOTAL CLAIMS			19				Γ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			۱٩ mir	nus 20=	•		Γ	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			. 3 minus 3 =		*		t	X43=		OR	X86=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=		OR	+290=	-	
* If	the difference	in column 1 is	ess than zero, enter "0" in column 2				L	TOTAL	385	OR	TOTAL		
CLAIMS AS AMENDED - PART II										_	OTHER	THAN	
	(Column 1) (Column 2) (Column 3)							SMAL	LENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 19	Minus	- 2	0	= -		X\$ 9=		OR	X\$18=		
	Independent	. 2	Minus	***	3	=		X43=		OR	X86=		
Ĺ	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM			+145=	<u> </u>	OR	+290=		
								TOTA			TOTAL		
	(Column 1) (Column 2) (Column 3)							DDIT. FE	E] O.1	ADÖIT. FEE		
		CLAIMS		HIGH					ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER		PREVIC		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
		AMENDMENT		PAID	FOR	ļ	-		FEE			FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CL AINA	=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM	ا البيا	' [+145=		OR	+290=		
							L	TOTA			TOTAL	•	
		(0.1		10-1	01	(O-1) O	ΑD	DDIT. FEI	E L	JO.,	ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
ENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus .	** .		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	<u></u>	=		X43=		00	X86=		
٧.	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM					OR			
+145= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		mber Previously Paid ober Previously Paid					r found	d in the a	ppropriate bo	x in col	umn 1.		